



# FIXED AMOUNT REIMBURSEMENT AGREEMENT 2.0

January 2016-December 2020 | Implementer: **GOVERNMENT OF LIBERIA**

The Ministry of Health (MOH) Fixed Amount Reimbursement Agreement (FARA) provides support to the MOH for implementation of its 10 year National Health Policy and Plan. Under this agreement, USAID reimburses the Government of Liberia (GOL) for the cost of implementing components of the Essential Package of Health Services that support family planning, maternal and child health and malaria prevention and treatment in three counties, Bong, Lofa, and Nimba, covering a population of roughly 1.4 million Liberians. The overarching goal of the FARA is government-led development programming.

The FARA is a prime example of the direct government to government (G2G) assistance model which is incorporated in USAID/Liberia's Country Development Cooperation Strategy 2013-2017, which transfers responsibility for ensuring access to quality health services to the MOH. Activities supported by the FARA include performance-based contracting of NGOs for health service delivery and health system strengthening activities such as monitoring and evaluation (M&E).

## **Current Activities**

- Public financial management
- A Performance-based Financing (PBF) system implemented
- MOH performance management at central and subnational levels:

- Management of contracting-in of Bong, Nimba and Lofa Counties for implementation of components of the Essential Package of Health Services that support family planning, maternal and child health and malaria prevention and treatment
- Use of quality facility and community-based health services
  - IEC, BCC, and community-based services
  - Quality facility-based EPHS services

### **Accomplishments to Date**

- Achieved full contracting-in with county health teams in Bong, Nimba and Lofa beginning July 1, 2018.

### **Planned Outcomes**

- Expansion of contracting-in to additional counties for technical support and service delivery undertaken.
- Competency of the Liberian Health Workforce improved
- Access to facility-based Essential Package of Health Services strengthened.
- Social mobilization and community-based services strengthened.
- Health Information Systems (HIS), results measurement, and reporting strengthened